## **CONBINED DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: A laser cutting apparatus

the specification of which: (check one)

 -	~	DECION!	ICATION

is attached hereto.							
was filed on	as application S	Serial No.	<u> </u>				
and was amended on							
PCT FILED APPLICATION ENTERING NATIONAL STAGE  was described and claimed in international application No.PCT/AU03/001703 and as amended on(if any).  1 hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.  1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.  PRIORITY CLAIM  1 hereby claim foreign priority benefits under 35 USC 119 of any foreign application(s) for patent or inventor's certifi-							
cate listed below and have also identified below any foreign application for patent or inventor's certificate having a fil- ing date before that of the application on which priority is claimed.  PRIOR FOREIGN APPLICATION(S)							
Country	Application Number	Date of Filing (day, month, year)	Priority Claimed				
Australia	2002953443	19.12.02	Yes				
tion(s) listed balow:	Title 35, United States Code	§119(e) of any United States pro					
Application No. Filing Date Status (patented, pending abandoned)  (Complete this part only if this is a continuing application.)							
ject matter of each of the claims	s of this application is not disc of 35 USC 112, i acknowle 37 Code of Federal Regulation	States application(s) listed below closed in the prior United States dge the duty to disclose informations §1.56 which became availabiling date of this application.	application in the manner				
Application No.	Filing Date	Status (patented, pending abandoned)					

Docket No.

## POWER OF ATTORNEY

The underlined hereby authorizes the U.S. attorney or agent named hereb to eccept and follow instructions from INTELLERO, as to say action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the underlighed. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the underlighed.

As a manual inventor, I hereby appoint the registered patent allumers represented by Customar No. 000466 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith includings Robert J. PATCH, Reg. No. 17,386, Andrew J. PATCH, Reg. No. 22,926, Robert F. HARGEST, Reg. No. 25,836, Bennit CASTEL, Reg. No. 35,041, Thomas W. PERKINS, Reg. No. 33,027, Roland E. LONG, Jr., Reg. No. 41,948, and Eric JENSEN, Reg. No. 37,858,

o/o YOUNG & THOMPSON Second Floor 745 South 25" Street Arlington, Virginia 22202



PATENT TRADEMARKOFFICE

Address all telephone calls to Young & Thompson at 703/521-2287. Telefac, 703/685-0573.

I beneby decide that all statements made berein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that will full electric means and the like so made are positivable by the or imprisonment, or both under Section 1001 of Title 18 that Whited States Code and that such willful false statements may jeopardize the velidity of the application or any palent issued therein.

Full name of sole or first inventor:	nventur: Christopher Max Modra						
Importants structures	farrow St	Cattle Dails H	17/7/05 Australian 11, 01d, 4	127, Astrolic			
Full name of second joint inventor, if	eny:			·			
Inventor's signature:		Date: _		*			
Residence:			***************************************				
Post Office Address:			· · · · · · · · · · · · · · · · · · ·				
Full name of third Joint Inventor, if en	<b>%</b>		<u> </u>				
Inventor's signature:	•	Date:	· · · · · · · · · · · · · · · · · · ·				
Residence:		·	•				
Post Office Address:		<del></del>		······································			
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Full name of fourth joint inventor, if a	апу:						
inventor's signature:		Date:		· · · · · · · · · · · · · · · · · · ·			
Residence:		Cliizenship.					
Dont Offine Aridrase:		•	•				

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